

This Page Is Inserted by IFW Operations  
and is not a part of the Official Record

## **BEST AVAILABLE IMAGES**

Defective images within this document are accurate representations of the original documents submitted by the applicant.

Defects in the images may include (but are not limited to):

- BLACK BORDERS
- TEXT CUT OFF AT TOP, BOTTOM OR SIDES
- FADED TEXT
- ILLEGIBLE TEXT
- SKEWED/SLANTED IMAGES
- COLORED PHOTOS
- BLACK OR VERY BLACK AND WHITE DARK PHOTOS
- GRAY SCALE DOCUMENTS

**IMAGES ARE BEST AVAILABLE COPY.**

As rescanning documents *will not* correct images,  
please do not report the images to the  
**Image Problem Mailbox.**

**THIS PAGE BLANK (USPTO)**

November 21, 2002

H. Samuel Frost B.A. (Eng. Sci.), M.Sc. (Nucl. Eng.)  
416 957 1687 sfrost@bereskinparr.com

Your Reference: 09/689,876  
Our Reference: 6162-005

**SUPPLEMENTAL INFORMATION  
DISCLOSURE STATEMENT**

The Commissioner of Patents  
& Trademarks  
Washington, D.C.  
U.S.A 20231

Dear Sir:

**Re: United States Patent Application No. 10/059,141  
For: PROGRESSIVE LENS WITH REDUSCED DISTORTION  
Filing Date: January 31, 2002  
Applicant: FRESCO, Bernard B.**

RECEIVED  
NOV 24 2002  
TECHNOLOGY CENTER 2800

In accordance with 37 CFR 1.97 and 1.98, and in recognition of the duty of disclosure set forth in 37 CFR 1.56, the applicant hereby submits an Information Disclosure Statement including (1) a listing of patents and other publications of which it is aware, and (2) a copy of each listed item. In accordance with the requirements of 37 CFR 1.97(c)(2), this Information Disclosure Statement is filed before the mailing of a Final Action, and is accompanied by the fee set forth in 37 CFR 1.17(p).

A copy of the front page of the International Search Report for the corresponding PCT application is attached hereto. The undersigned's understanding of the relevance of each document is based upon the search report.

The prescribed fee of \$180.00 is enclosed in our cheque number \_\_\_\_\_. Please deduct any additional fees which may be required or remit any excess fees, to our deposit account no. 02-2095.

*Please send all correspondence to the Toronto office:*

Scotia Plaza, 40 King St. West, 40th Floor, Toronto, Ontario, Canada M5H 3Y2 Tel: 416.364.7311 Fax: 416.361.1398	2000 Argentia Rd., Plaza 4, Ste. 430, Mississauga, Ontario, Canada L5N 1W1 Tel: 905.812.3600 Fax: 905.814.0031	Waterloo Technology Campus, 408 Albert St., Ste. 2, Waterloo, Ontario, Canada N2L 3V3 Tel: 519.783.3210 Fax: 519.783.3211
--	--	---

**THIS PAGE BLANK (USPTO)**

In view of the foregoing, it is respectfully submitted that the Information Disclosure Statement should be considered at this time by the Examiner.

Respectfully submitted,



H. Samuel Frost  
Registration No. 31,696  
/tw  
Encl.

**THIS PAGE BLANK (USPTO)**

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Substitute for form 1449A/PTO		Complete if Known	
<b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b> <i>(use as many sheets as necessary)</i>		Application Number	10/059,141
		Filing Date	01/31/2002
		First Named Inventor	FRESCO
		Group Art Unit	2873
		Examiner Name	
Sheet	1	of	1
		Attorney Docket Number	4029-24

## U.S. PATENT DOCUMENTS

---

**FOREIGN PATENT DOCUMENTS**

---

Examiner Signature		Date Considered	
-----------------------	--	--------------------	--

**EXAMINER:** Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> See Kinds Codes of USPTO Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 901.04.

<sup>3</sup> Enter Office that issued the document, by the two-letter code (WPO Standard ST.3). <sup>4</sup> For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup> Kind of document by the appropriate symbols as indicated on the document under WPO Standard ST. 16 if possible. <sup>6</sup> Applicant is to place a check mark here if English language Translation is attached.

**Burden Hour Statement:** This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

**THIS PAGE BLANK (USPTO)**

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Substitute for form 1449A/PTO				Complete if Known	
<b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b> <i>(use as many sheets as necessary)</i>				Application Number	10/059,141
				Filing Date	01/31/2002
				First Named Inventor	FRESCO
				Group Art Unit	2873
				Examiner Name	
Sheet	1	of	1	Attorney Docket Number	4029-24

#### OTHER PRIOR ART – NON PATENT LITERATURE DOCUMENTS

Examiner Signature		Date Considered	
-----------------------	--	--------------------	--

**[REDACTED]** \*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

**THIS PAGE BLANK (USPTO)**

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

180.00

## Complete if Known

Application Number	10/059,141
Filing Date	January 31, 2002
First Named Inventor	Dr. Bernard Fresco
Examiner Name	Scott Sugarman
Art Unit	2873
Attorney Docket No.	4029-24

## METHOD OF PAYMENT (check all that apply)

Check  Credit card  Money Order  Other  None

Deposit Account:

Deposit Account Number

022095

Bereskin &amp; Parr

The Director is authorized to: (check all that apply)

Charge fee(s) indicated below  Credit any overpayments

Charge any additional fee(s) or any underpayment of fee(s)

Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code (\$)	Fee	Fee Code (\$)	Fee Description	Fee Paid
1001 770	2001 385				Utility filing fee	
1002 340	2002 170				Design filing fee	
1003 530	2003 265				Plant filing fee	
1004 770	2004 385				Reissue filing fee	
1005 160	2005 80				Provisional filing fee	
SUBTOTAL (1) (\$)		0.00				

## 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Independent Claims	Multiple Dependent	Fee from Extra Claims below	Fee Paid
			20** = <input type="text"/> X <input type="text"/> = 0.00	
			3 * = <input type="text"/> X <input type="text"/> = 0.00	

Large Entity	Small Entity	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 86	2201 43	Independent claims in excess of 3
1203 290	2203 145	Multiple dependent claim, if not paid
1204 66	2204 43	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2) (\$)		0.00

\*\* or number previously paid, if greater. For Reissues, see above

## FEE CALCULATION (continued)

## 3. ADDITIONAL FEES

Large Entity Small Entity

Fee Code (\$)	Fee (\$)	Fee Code (\$)	Fee (\$)	Fee Description	Fee Paid
1051 130	2051 65			Surcharge - late filing fee or oath	
1052 50	2052 25			Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130			Non-English specification	
1812 2,520	1812 2,520			For filing a request for ex parte reexamination	
1804 920*	1804 920*			Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*			Requesting publication of SIR after Examiner action	
1251 110	2251 55			Extension for reply within first month	
1252 420	2252 210			Extension for reply within second month	
1253 950	2253 475			Extension for reply within third month	
1254 1,480	2254 740			Extension for reply within fourth month	
1255 2,010	2255 1,005			Extension for reply within fifth month	
1401 330	2401 165			Notice of Appeal	
1402 330	2402 165			Filing a brief in support of an appeal	
1403 290	2403 145			Request for oral hearing	
1451 1,510	1451 1,510			Petition to institute a public use proceeding	
1452 110	2452 55			Petition to revive - unavoidable	
1453 1,330	2453 665			Petition to revive - unintentional	
1501 1,330	2501 665			Utility issue fee (or reissue)	
1502 480	2502 240			Design issue fee	
1503 640	2503 320			Plant issue fee	
1460 130	1460 130			Petitions to the Commissioner	
1807 50	1807 50			Processing fee under 37 CFR 1.17(q)	
1806 180	1806 180			Submission of Information Disclosure Stmt	180.00
8021 40	8021 40			Recording each patent assignment per property (times number of properties)	
1809 770	2809 385			Filing a submission after final rejection (37 CFR 1.129(a))	
1810 770	2810 385			For each additional invention to be examined (37 CFR 1.129(b))	
1801 770	2801 385			Request for Continued Examination (RCE)	
1802 900	1802 900			Request for expedited examination of a design application	
Other fee (specify)					
*Reduced by Basic Filing Fee Paid				SUBTOTAL (3) (\$)	180.00

11/26/2003 01 FC:1806

SUBMITTED BY		(Complete if applicable)		
Name (Print/Type)	H. Samuel Frost	Registration No. (Attorney/Agent)	31,696	Telephone (416) 364-7311
Signature		Date		November 21, 2003

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

**THIS PAGE BLANK (USPTO)**

Please type a plus sign (+) inside this box → 

Approved for use through 10/31/2002, OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/059,141
		Filing Date	01/31/2002
		First Named Inventor	FRESCO
		Group Art Unit	2873
		Examiner Name	
Total Number of Pages in This Submission		Attorney Docket Number	4029-24

## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Receipt Postcard Letter to Commissioner of Patents
		Remarks

NOV 24 2003  
TECHNOLOGY CENTER 2300  
RECEIVED

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	BERESKIN & PARR	
Signature		
Date	November 21, 2003	

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:

Typed or printed name		Date	
Signature			

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

**THIS PAGE BLANK (USPTO)**